



INTEGRATED DEVICE TECHNOLOGY, INC.
2975 STENDER WAY, M/S C4-25
SANTA CLARA, CA 95054
(408) 492-8640 - DIRECT
(408) 492-8434 - FAX

FAX COVER SHEET

TO: ISSUE FEE PAYMENT U.S. P.T.O.	From: Christopher Novak Intellectual Property Counsel
Tel. N/A	Tele: 408-330-1576
Fax: (703) 746-4000	Date: February 3, 2005
Sheets: Cover + 5	
RE: <u>Issue Fee Payment: Appl. S/N 10/621,055 filed 7/15/03. Cesar A. Talledo</u>	

Message:

Please find attached:

1. Part B-Issue Fee Transmittal + Duplicate
2. Change of Correspondence
3. "Fee Address" Indication Form
4. Transmittal Form

Thank you.

Christopher Novak
Intellectual Property Counsel
Integrated Device Technology, Inc.
2975 Stender Way M/S C4-25
Santa Clara, CA 95054

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PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/621055
	Filing Date	7/15/2003
	First Named Inventor	Talledo, Cesar Alejandro
	Art Unit	2816
	Examiner Name	TRA. ANH QUAN
Total Number of Pages in This Submission	Attorney Docket Number	1828

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input checked="" type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): "FEE ADDRESS" INDICATION FORM
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	CHRISTOPHER NOVAK, REG. NO. 42,041
Signature	<i>Christopher Novak</i>
Date	JAN 13 - 2005

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